

APPENDIX A

PERSONAL AWARD RECOMMENDATION

ENSURE ALL BLOCKS ARE FILLED IN, SIGNED AND DATED.

<b>FROM:</b> ADDRESS: Deputy Commander, Naval Security Group Command		<b>TO: (Awarding Authority) ADDRESS:</b> UIC/RUC: N00069 Commander, Naval Security Group Command	
<b>COMMAND POC:</b> Jerry Becklehimer <b>PHONE #</b> (301) 617-3641		<b>14. EXP. OF ACTIVE DUTY</b> 31 DEC 99 <b>IF RETIREMENT/SEPARATION, NUMBER OF YEARS</b> N/A	
<b>1. SOCIAL SECURITY NUMBER</b> 000-00-0000	<b>2. DESIG/NEC/MOS</b> 9284	<b>15. EST. DETACHMENT DATE (Only complete if transferring)</b> <input type="checkbox"/> RETIREMENT <input type="checkbox"/> TRANSFER <input type="checkbox"/> TERMINAL LEAVE	
<b>3. NAME (Last, first, MI)</b> DOE, John J.		<b>16. NEW DUTY STATION (Home address if separation anticipated)</b> (Only complete if individual is under orders) ADDRESS:	
<b>4. COMPONENT (USN, USMC, etc.)</b> USN		<b>17. UNIT AT TIME OF ACTION/SERVICE</b> NAVSECGRUACT GROTON CT	
<b>5. GRADE/RATE</b> CTMC		<b>18. DUTY ASSIGNMENT</b> DIV OFF	
<b>6. WARFARE DESIGNATOR</b> SS	<b>7. UIC/RUC:</b> 65991	<b>19. PREVIOUS PERSONAL DECORATIONS AND PERIOD RECOGNIZED (exclude Purple Heart and Combat Action Ribbon)</b> NA - Jan 91-Aug 93 NC - Aug 93-Jun 95	
<b>8. RECOMMENDED AWARD</b> (See instruction #3 on back) NC	<b>9. SPECIFIC ACHIEVEMENT</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>10.</b> <input type="checkbox"/> HEROIC <input checked="" type="checkbox"/> MERITORIOUS <input type="checkbox"/> HEROIC POSTHUMOUS <input type="checkbox"/> MERITORIOUS POSTHUMOUS <input type="checkbox"/> MIA	
<b>11. NUMBER OF AWARD OF RECOMMENDED MEDAL</b> SECOND		<b>20. PERSONAL AWARDS RECOMMENDED-NOT YET APPROVED</b> None	
<b>12. ACTION DATE/MERITORIOUS PERIOD</b> 1 JAN 96 - 31 DEC 96		<b>21. OTHER PERSONNEL BEING RECOMMENDED FOR SAME ACTION</b> None	
<b>13. GEOGRAPHIC AREA OF ACTION/SERVICE</b> LANTFLT		<b>22. I certify that the facts contained in the summary of action are</b> <input type="checkbox"/> known to me <input checked="" type="checkbox"/> a matter of record	
<b>NAME, GRADE, TITLE OF ORIGINATOR</b> (Leave Blank)		<b>SIGNATURE</b>	<b>DATE</b>
<b>23. FORWARDING ENDORSEMENTS BY VIA ADDRESSEE(S). (Attach additional sheets only as necessary)</b>			
<b>VIA</b>	<b>COMMAND</b> (To be completed by originator)	<b>RECOMMENDED AWARD</b>	<b>COMBAT "V"</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
1			
2			
3			
<b>24. TO BE COMPLETED BY AWARDING AUTHORITY</b>			
<b>DISPOSITION OF BASIC RECOMMENDATION</b>	<b>COMBAT "V"</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>EXTRAORDINARY HEROISM RECOMMENDED</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>SIGNATURE, GRADE, TITLE</b>
<b>FOR USE OF NDBDM ONLY</b>			
<b>FROM: SECNAV (NDBDM)</b> <b>TO: CNO (NO9B33) CMC (CODE MHM)</b>		<b>DATE:</b>	
<b>1. Extraordinary heroism recommended</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA <b>2. Reviewed and recorded</b>		By direction _____	